



STATE OF MISSISSIPPI
DEPARTMENT OF CORRECTIONS
Marshall L. Fisher
COMMISSIONER

Jerry Williams
Deputy Commissioner

Institutions
(601) 359-5607 5323(FAX)

May 24, 2016

MDOC Records Department
P.O. Box 24388
Jackson, MS 39225

Dear Sir or Madam,

Pursuant to your request, enclosed please find the requested documents regarding the inmate record of **Brian Bullock, MDOC #169774**. Please be advised that our office does not handle medical record requests nor does this office handle any records regarding misdemeanor offenses.

If this office can be of any further assistance, please feel free to contact us at 601-933-2889, extension 6094.

Respectfully,

A handwritten signature in black ink, appearing to read "LaTisha K. Lockhart".

LaTisha K. Lockhart
Projects Officer III, Special
Operations Department Supervisor

lkl

EXHIBIT "E"

STATE OF Mississippi)

) SS.

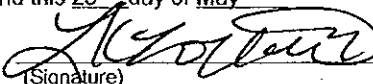
COUNTY OF Hinds)

I, LaTisha K. Lockhart hereby certify that I am the of the Special Projects Officer-III of the
(Official Position)

Records Department- Central Office, a division of the State of Mississippi
(name of department or penitentiary)

situated in the county and State aforesaid, that in my legal custody as such officer are the original files and records of persons heretofore committed to said penal institution; that the Institutional Records, fingerprints (if available and all other documents available) attached hereto are copies of the original records of Brian Bullock, MDOC #169774 a person heretofore committed to said penal institution and who serve a term of imprisonment therein; that I have compared the foregoing and attached copies with their respective originals now on file in my office and each thereof contains, and is, a full, true and correct transcript and copy from its said original.

IN WITNESS WHEREOF, I have hereunto set my hand this 25th day of May
A.D. 2016



(Signature)

Special Projects Officer-III
(Official Title)

STATE OF _____)

) SS.

COUNTY OF _____)

I, _____, Presiding Judge of _____ State
of _____, County of _____, which Court is a Court of Record having a

seal, do hereby certify that _____ whose name is subscribed to the
above Certificate, was at the date thereof, and is now _____ of the
_____ and is the legal keeper and the officer having the legal
custody of the original of the said _____; that the said Certificate is in
(penitentiary)
due form; and that the signature subscribed thereto is his genuine signature.

IN WITNESS WHEREOF, I have hereunto subscribed my name in my official character as
such Judge, of the County and State aforesaid, this _____ day of _____, A.D.

(Signature)

Judge of _____

STATE OF _____)

) SS.

COUNTY OF _____)

I, _____ Clerk of _____ of the State of
_____, County of _____, which Court is Court of Record

having a seal which is annexed hereto, do hereby certify that _____, whose name is subscribed to the foregoing Certificate of due attestation, was, at the time of signing the same, Judge of _____ aforesaid, and was duly commissioned, qualified and authorized by law to execute the said Certificate. And I do further certify that the signature of the above named Judge to the said Certificate of due attestation is genuine.

IN WITNESS WHEREOF, I have hereunto set my hand and annexed the seal of the
_____ at my office in said County, this _____ day of _____, A.D.
(name of court)

(signature)
Clerk of _____

Mississippi Department of Corrections

Offender Number: 169774 Name: BULLOCK, BRIAN KALE
 Date of Birth: [REDACTED] 1992 FBI Number: 964357KD0 Race: WHITE Sex: MALE
 Height: 5' 8" Weight: 180 Hair Color: BROWN Eye Color: BROWN
 SSN: [REDACTED] Complexion: FAIR Build: MEDIUM
 Location: UNIT 29 Custody: INMATE Entry Date: 05/09/2013
 Term to Serve: 30 Y, 0 M, 0 D Tent. ERS Date:
 Court Ordered Status: Tentative Release: 08/25/2011
 Statutory Parole Date: Status: ACTIVE
 Parole Set Off Date:
 Parole Revocation Hearing Date:

Sent #	Cause Number	Offense	Date Sentenced	County of Conviction	CC/CS	Number of Days for Booking
1	19911	ROBBERY	08/25/2011	LAUDERDALE	0/0	262
	Booking Number: A		Term of Sentence: 10 Y, 0 M, 0 D			
			Term Suspended: 10 Y, 0 M, 0 D			
			Term of Probation: 00 Y, 00 M, 00 D			
2	19911	ROBBERY	08/25/2011	LAUDERDALE	0/0	Days
	Booking Number: A		Term of Sentence: 00 Y, 00 M, 00 D			
			Term Suspended: 10 Y, 0 M, 0 D			
			Term of Probation: 5 Y, 0 M, 0 D			
1	538-14	ROBBERY	04/04/2013	LAUDERDALE	0/0	Still
	Booking Number: B		Term of Sentence: 10 Y, 0 M, 0 D			incarcerated
			Term Suspended: 00 Y, 00 M, 00 D			(2-24-11
			Term of Probation: 00 Y, 00 M, 00 D			to present)
2	538-14	MURDER 2ND DEGREE	06/01/2015	LAUDERDALE	0/1	
	Booking Number: B		Term of Sentence: 20 Y, 0 M, 0 D			
			Term Suspended: 00 Y, 00 M, 00 D			
			Term of Probation: 00 Y, 00 M, 00 D			

Mississippi Department of Corrections - STAFF REQUEST FOR INMATE RE-CLASSIFICATION

NAME: BULLOCK, BRIAN KALE MDOC#: 169774 UNIT: CMCF QB

Current Custody Level: UNCLASSIFIED

UNIT TRANSFER FROM

UNIT TRANSFER TO

INCARCERATION PROGRAM FROM

TO:

JUSTIFICATION:

PART II. (TRUSTY STATUS ONLY)
APPROVED FOR TRUSTY STATUS:INCARCERATION PROGRAM: 

EFFECTIVE DATE: 5/15/2013

JUSTIFICATION: This inmate is being reviewed by the Classification Hearing officer for assignment to Trusty Status. According to MS Code 1972 annotated, Statue 47-5-138.1, an offender may be awarded a trusty time allowance of thirty (30) days' reduction of sentence for each thirty (30) days of participation during any calendar month in an approved program while in trusty status, including satisfactory participation in educational or instructional programs, satisfactory participation in work projects and satisfactory participation in any special incentive program effective April 28, 2004.

(Failure to remain in this approved program could result in loss of trusty status and the earned time allowance).

REMOVED FROM TRUSTY STATUS:

REASON: EFFECTIVE DATE:

PART III.

☐ SATELLITE PLACEMENT☐ JOINT COUNTY STATE WORK PROGRAM☐ OTHER:

JUSTIFICATION: Approved to work on non-profit charitable organization work project. Defined by section 501 (c) (3) of the Internal Revenue Code of 1986.

Unit case Manager/Date	Present Work Supervisor/Date	New Work Supervisor/Date
Record Check By: VICTORIA EVANS	Via: COMPUTER Received: 5-9-13	
Age: 20	Race/Sex: WH / M	
Offense (s) ROBBERY		
Length of Sentence: 10 Y, 0 M, 0 D	County: LAUDERDALE	
Sentence Date: 4/4/2013	Sentence Begin: 2/24/2011	
Convictions:	Prior Confinements:	Custody: UNCLASSIFIED Date: 9/30/2011
Escape Date:	Return Date:	Escape From:
Evaluation:	Entry Type: PROBATION REVOKED	

☐ Detainer With Whom:

Medical Class: Good to excellent

Medications:

ERS Date: 12/17/2019

PAROLE Date:

TENT. Discharge: 02/21/2021

MAX Discharge: 02/21/2021

☐ Institutional Hearing OfficerNo. of Disciplinary: Last RVR Date: ☐ State Hearing Officer

CLASSIFICATION HEARING OFFICER ACTION

PL000425

BULLOCK BRIAN KALE

Date: 5/15/2013

INTERVIEWED ☒

Signature of Inmate

RECORD INTERVIEWED ☒

Tape#: V9

Side: B

Section: _____

YES VICTORIA E EVANS /NN

NO _____

☒ Approved ☐ Disapproved

EDIA G COLEMAN

6/27/2013

Director/Assistant Director of Offender Services Signature

DATE

☒ By checking this box, I certify that I am the duly authorized person whose name appears above.

PL000426